

HOME IMPROVEMENT LOAN

Request for Service



South Salina Corridor Neighborhood Home Improvement Revolving Loan Fund Program

CUSTOMER INFORMATION			
Borrower		Co-Borrower	
Social Security No.	Date of Birth	Social Security No.	Date of Birth
Address (Street)		Address (Street)	
(City, Zip)		(City, Zip)	
Phone: Home	Cell	Phone: Home	Cell
Email		Email	
Are you a citizen of the United States? YES <input type="checkbox"/> NO <input type="checkbox"/>		Are you a citizen of the United States? YES <input type="checkbox"/> NO <input type="checkbox"/>	
EMPLOYMENT INFORMATION			
Name of Employer		Name of Employer	
Number of Years	Self Employed? YES <input type="checkbox"/> NO <input type="checkbox"/>	Number of Years	Self Employed? YES <input type="checkbox"/> NO <input type="checkbox"/>
Employer Address		Employer Address	
Position		Position	
Business Phone	Annual Income	Business Phone	Annual Income
HOUSEHOLD INFORMATION: PLEASE INCLUDE ALL HOUSEHOLD MEMBERS, ESPECIALLY THOSE AGE 7 OR YOUNGER			
<i>Please list ALL persons currently living in your household. (Use and attach separate sheet of paper if additional space is needed)</i>			
Name	Date of Birth	Annual Salary (If any)	Source of Income
PROPERTY INFORMATION			
Address of Property to be improved (street, city, zip)			# of Units
Property you are renovating is your Primary Residence? YES <input type="checkbox"/> NO <input type="checkbox"/>		Property Deed/Title in the name of	
		Are your property taxes escrowed? YES <input type="checkbox"/> NO <input type="checkbox"/>	
<i>Please list institutions or persons with mailing addresses of those who hold a mortgage on the property.</i>			
Name	Address		Balance
Please describe needed Repair Items (attach another sheet of paper if needed):			
RENTAL PROPERTY INFORMATION			
Address of Rental Property (Street, City, Zip)			
Do you receive rental income? YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes, monthly amount:	Any tenants under seven years of age? YES <input type="checkbox"/> NO <input type="checkbox"/>	
<i>Please list institutions or persons with mailing addresses of those who hold a mortgage on the property.</i>			
Name	Address		Balance

124 East Jefferson Street • Syracuse, NY 13202 • Tel (315) 474-1939 • Fax (315) 474-0637 • www.homehq.org



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INFORMATION FOR GOVERNMENT MONITORING PURPOSE

The following information is requested by the Federal Government for certain types of loans related to a dwelling in order to monitor the lender's compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a Lender may not discriminate either on the basis of this information, or on whether you choose to furnish it. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, under Federal regulations, this lender is required to note the information on the basis of visual observation and surname if you have made this application in person. If you do not wish to furnish this information, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the lender is subject under applicable state law for the particular type of loan applied for.)

BORROWER <input type="checkbox"/> I do not wish to furnish this information	CO BORROWER <input type="checkbox"/> I do not wish to furnish this information
Ethnicity <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	Ethnicity <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
Race <input type="checkbox"/> American Indian, Alaskan Native <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Asian American <input type="checkbox"/> White	Race <input type="checkbox"/> American Indian, Alaskan Native <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Asian American <input type="checkbox"/> White
Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female

SIGNATURE SECTION

I certify to the truth of my statements above and authorize the Lender to obtain credit reports in connection with this application and any Loan or Account established hereby, as well as any update, renewal, extension, review or collection thereof. If it does, I will, upon request, be informed of that fact and each credit bureau's name and address. I also authorize the Lender to verify with others any information contained in this application and to report its transactions with me.

All statements made in this application are true and are made for the purpose of requesting home improvement services. I understand that it may be a federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements concerning any of the above facts as applicable under the provision of the United States Criminal Code.

Home HeadQuarters, Inc., its agents and/or assignees, reserves the right to inspect any and all work associated with a Home Improvement Loan, Energy Improvement Loan or grant or any other Home HeadQuarters' financial product or service. In compliance with federal lead regulations, the federal government requires that Home HeadQuarters inspect all homes to be assisted for possible defective paint surfaces.

This Request For Service in no way guarantees or implies funding and/or service through Home HeadQuarters, its agents and/or assignees.

Signature of Borrower	Date
Signature of Co-Borrower	Date

Program Details

1. 4.99% fixed interest rate (**APR-Annual Percentage Rate 5.288%***).
2. Loans of up to \$10,000 (based on eligibility).
3. No income eligibility requirements.
4. No home equity required.
5. Flexible terms.
6. Exterior improvements/repairs only.
7. Your choice of contractor (Must provide general liability and worker's compensation insurance).
8. Home improved must be primary residence.

***Assumes a loan amount of \$10,375 with a term of 7 years.**

To apply, you must submit the following:

1. South Salina Corridor Neighborhood Home Improvement Loan Program Request for Service form (signed and dated).
2. Copy of the recorded deed to your home.
3. Proof of income for all members who reside in the household (i.e., 3 recent pay stubs; benefit letter for SSI, Social Security, pension, unemployment, disability, etc.).
4. Copy of last year's federal tax return (if filed).
5. Copy of declarations page of homeowner's insurance stating current policy period, amount of coverage & listing of all mortgages against the property.
6. Copy of picture ID (i.e., driver's license).
7. Lead test for anyone under the age of seven.

